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AUG 21 2007



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MCGINN INTELLECTUAL PROPERTY LAW GROUP, PLLC  
8321 OLD COURTHOUSE ROAD  
SUITE 200  
VIENNA, VA 22182-3817

## Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

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| (Depositor's name) |             |
| HAND DELIVERED     | (Signature) |
|                    | (Date)      |

| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|-----------------|-------------|----------------------|---------------------|------------------|
| 10/693,492      | 10/27/2003  | Kikuji Horiuchi      | 030115              | 3129             |

TITLE OF INVENTION: ARTIFICIAL ROOT OF A TOOTH

| APPLN. TYPE           | SMALL ENTITY | ISSUE FEE DUE  | PUBLICATION FEE DUE                   | PREV. PAID ISSUE FEE | TOTAL FEE(S) DUE | DATE DUE   |
|-----------------------|--------------|----------------|---------------------------------------|----------------------|------------------|------------|
| nonprovisional        | NO           | \$1400         | \$300                                 | \$0                  | \$1700           | 08/22/2007 |
| EXAMINER              | ART UNIT     | CLASS-SUBCLASS | 08/22/2007 AWONDAF2 00000126 10693492 |                      |                  |            |
| STOKES, CANDICE CAPRI | 3732         | 433-174000     | 01 FC:1501                            | 1400.00 OP           |                  |            |
|                       |              |                | 02 FC:1504                            | 300.00 OP            |                  |            |
|                       |              |                | 03 FC:1501                            | 15.00 OP             |                  |            |

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
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## 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY AND STATE OR COUNTRY)

K. K. HOLLYX

Numazu-shi, Shizuoka, Japan

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

- ☒ Issue Fee
- ☒ Publication Fee (No small entity discount permitted)
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- ☒ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 50-0481 (enclose an extra copy of this form).

## 5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.
- ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Date August 21, 2007

Typed or printed name

Sean M. McGinn, Esq.

Registration No. 34,386

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